



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: *[illegible]* et al.

SERIAL NO.: 09/699,002

GROUP ART UNIT: 1616

FILED: October 26, 2000

EXAMINER: Badio.

FOR: HIGH VISCOSITY LIQUID CONTROLLED DELIVERY SYSTEM AND MEDICAL OR  
SURGICAL DEVICE

ATTORNEY DOCKET NO.: S0351/249009

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*Emily Guida Foss*  
Emily Guida Foss

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

DATE: November 8, 2004

NOTICE OF APPEAL TO THE  
BOARD OF PATENT APPEALS AND INTERFERENCES

Sir:

Applicants appeal the decision of Examiner Badio finally rejecting claim 92  
and objecting to claim 89, in the above-identified application by the final Office  
Action dated May 6, 2004 and the Advisory Action mailed September 17, 2004.

The Commissioner is hereby authorized to charge Deposit Account No. 11-  
0855 the fee of \$340.00 for filing a Notice of Appeal under 37 C.F.R. §1.17(e).

11/15/2004 HALI11 00000084 09699002

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340.00 DP

Respectfully submitted,

*Bruce D. Gray*  
Bruce D. Gray  
Reg. No. 35, 799

KILPATRICK STOCKTON LLP  
Suite 2800, 1100 Peachtree Street  
Atlanta, Georgia 30309-4530  
(404) 815-6218

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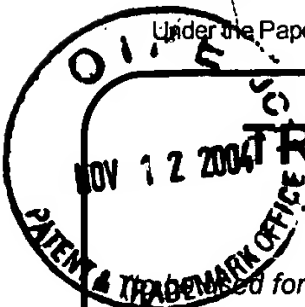
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IFW AF  
1616



# TRANSMITTAL FORM

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Application Number	09/699,002
Filing Date	October 26, 2000
First Named Inventor	Gibson, et al.
Group Art Unit	1616
Examiner Name	Badio
Attorney Docket Number	S0351/249009
Total Number of Pages in This Submission	

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Under 37 C.F.R. 1.137(b) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>-Check in amount of \$1210</b> <b>-Return Receipt Postcard</b>		
<table><tr><td>Remarks</td><td></td></tr></table>			Remarks	
Remarks				

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Bruce D. Gray, Reg. No. 35,799 Kilpatrick Stockton LLP
Signature	
Date	November 8, 2004

## CERTIFICATE OF MAILING

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